PTO/SB/22 (12-04)
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PETITION FOR EXTENSION OF TIME UNDER 3 FY 2005	Docket Number (Optional) 0879-0296P								
(Fees pursuant to the Consolidated Appropriations Act,	<u></u>								
Application Number 09/758,423-Conf.	Application Number 09/758,423-Conf. #8555								
For IMAGE REPRODUCING APPARATUS AND DIGITAL CAMERA									
Art Unit 2615	Art Unit 2615								
This is a request under the provisions of 37 CFR 1.13 identified application.									
The requested extension and fee are as follows (che	ck time period des	ired and enter the appr	ropriate fee below):						
X One month (37 CFR 1.17(a)(1))	<u>Fee</u> \$120	Small Entity Fee \$60	\$ 120.00						
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$						
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$						
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$						
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$						
A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is a The Director has already been authorized to charge and Deposit Account Number 02-2448	charge fees in this		any overpayment, to						
I am the applicant/inventor. assignee of record of the entir Statement under 37 CFR attorney or agent of record. R attorney or agent order 37 CFR attorney or agent order 37 CFR Registration number if acting un	3.73(b) is enclosed registration Numbe R 1.34. nder 37 CFR 1.34	d. (Form PTO/SB/96).	·						
- Willen	A440,439	July 1	4, 2005						
Signature	-	Date							
Michael R. Cammarata Typed or printed name	(703) 205-8000 Telephone Number								
NOTE: Signatures of all the inventors or assignees of record of the than one signature is required, see below.	entire interest or their repa	•							
Total of 1 forms are submit	ted.								

07/15/2005 SZEWDIE1 00000090 09758423

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PTO/SB/17 (12-04v2)

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Complete if Known

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JEM

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Application Number		09/758,423-Conf. #8555							
FEE TRANSMITTAL		Filing Date		January 12, 2001							
_			First Named Inventor Takeshi MIS			.WA					
For FY 2005			Examiner Name G. V. Selby								
Applicant claims small entity status. See 37 CFR 1.27			Art Unit		2615						
TOTAL AMOUNT OF PAY	MENT	(\$) 120.00		Attorney Docket	No.	0879-0296P					
METHOD OF PAYMENT (check all that apply)											
X Check Credit Card Money Order None Other (please identify):											
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP											
For the above-iden	tified deposit	account, the Di	rector is	hereby authorize	d to: (che	eck all that apply)					
Charge fee(s	•			<u> </u>		ndicated below, ex	cept for th	e filing fee			
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17											
FEE CALCULATION											
1. BASIC FILING, SEARCE	•										
	FILIN	G FEES	SE	ARCH FEES	EXAM	NATION FEES					
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)			
Utility	300	150	500	250	200	100		-			
Design	200	100	100	50	130	65					
Plant	200	100	300	150	160	80					
Reissue	300	150	500	250	600	300					
Provisional	200	100	0.	0	0	0					
2. EXCESS CLAIM FEES								Small Entity			
Fee Description	. n.						Fee (\$)	Fee (\$)			
Each claim over 20 (includ	-						50	25			
Each independent claim ov Multiple dependent claims	-	ng Reissues)					200 360	100 180			
•		(#\	Ean E	acid (\$)		Multiple Depende		100			
		ee (\$) _	reer	Paid (\$)	_	Multiple Dependent Claims Fee (\$) Fee Paid (\$)		,			
1621 =	× -				ī	<u>ee (\$)</u>	ee raid (y	1			
		ee (\$)	Fee F	Paid (\$)				_			
1112 =	× _	= _									
3. APPLICATION SIZE FE		nd 100 abouts o	·	(avaludina alaatu	miaally 4	Slad saguanas ar					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50											
sheets or fraction there						3,					
<u>Total Sheets</u> <u>E</u> - 100 =	xtra Sheets	Number o	f each a	dditional 50 or frac			<u>Fee I</u> =	Paid (\$)			
4. OTHER FEE(S)											
Non-English Specificat	ion, \$130 fe	e (no small ent	ity disc	ount)							
Other (e.g., late/filing surcharge): 125/1 Extension for response within first month 120.00											
SUBMITTED BY	/HH/	1 4	७,५३	9							
Signature		Slin	,	Registration No. (Attorney/Agent) 39,491 Telephone (703) 205-8000			5-8000				
Name (Print/Type) Michael R. Cammarata Date July 14, 2005						2005					
1/2											